

Entry Blank—Please Type or Print

~~Post Box
Cage
TICKET~~

Ms./Artist Mr./Artist _____

Janice Lessman-Moss
706 Steele Street
Kent, OH 44240

(last name last)

Permanent Address _____
Street _____ City _____

Zip _____ area _____

Daytime Tel. (216) 678-8454

Temporary or
Studio Address _____
Street _____ City _____

Zip _____ area _____

Daytime Tel. ()

If you do not presently live in one of the counties of the Western Reserve, in which county were you born? _____

Collaborator (if any) _____

If May Show entries are not accepted or are not sold:

Artist will pick up at Museum.
 Museum should dispose of.
 Museum should ship to artist at artist's expense:

_____ Street _____

City _____ State _____ Zip _____

Special Instructions

Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.

When necessary, include instructions or a drawing for assembling and displaying an object.

Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until August 6, 1989.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.

Signature _____

I have received the unsold/unaccepted object(s) in good condition.

Signature _____

Entry Blanks

A

Paintings Graphics Photography
 Sculpture Crafts (specify category)

Materials used (media):

LINEN, WOODEN RODS, PAINT
HARSETHAIR

Title

tty 4
BURNING BRIDGES

Price or NFS

\$4800.

Insurance Value
if NFS OnlySize *76" x 41"*
height x width x depth

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price of Print Unframed	Price of Frame Only
ACCEPTED <i>X</i>	DO NOT WRITE IN THIS SECTION <i>tty 4</i>	ACCEPTED <i>X</i>	
NOT ACCEPTED	<i>1 4800 tty</i>	NOT ACCEPTED	

B

Paintings Graphics Photography
 Sculpture Crafts (specify category)

Materials used (media):

Title

Price or NFS

Insurance Value
if NFS Only

Size

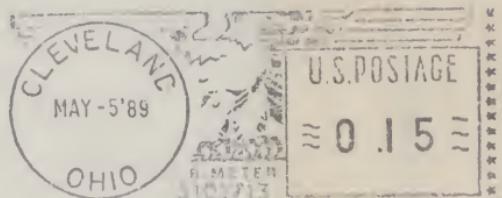
height x width x depth

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price of Print Unframed	Price of Frame Only
ACCEPTED	DO NOT WRITE IN THIS SECTION	ACCEPTED	REC'D
NOT ACCEPTED		NOT ACCEPTED	DATE

Detach entire portion along dotted line and submit with slides, but retain tags

1989 MAY SHOW
The Cleveland Museum of Art
Cleveland, Ohio 44106



Name _____
Address _____

Janice Lessman-Moss
706 Steele Street
Kent, OH 44240

City & State _____ Zip _____

*Do Not
Detach*

Notification #1

A

Paintings Graphics Photography
 Sculpture Crafts

Title

Burning Bridges

ACCEPTED	NOT ACCEPTED
X	

Do Not Detach

B

Paintings Graphics Photography
 Sculpture Crafts

Title

ACCEPTED	NOT ACCEPTED

IMPORTANT - DELIVERY DATES

SAT. MAY 20

(TUES.-FRI.) MAY 22 - 26